## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

<b>a</b> ,	A		or <u>Fax</u>	(703) 746-4000			
INSTRUCTIONS: This fo appropriate. All further co- indicated unless carrected maintenance fee notification	rrespondence including the	smitting the ISSU Patent, advance or in Block 1, by (a	E FEE and PUBLIGHTS and notification () specifying a new of	CATION FEE (if rec of maintenance fees correspondence addres	quired). Blocks 1 through 5 s will be mailed to the current ss; and/or (b) indicating a sep	should be completed when correspondence address a arate "FEE ADDRESS" fo	
	CE ADDRESS (Note: Use Block 1 for	any change of address)		Note: A certificate	of mailing can only be used f	or domestic mailings of th	
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	590 03/09/2005			have its own certifica	ate of mailing or transmission.		
	RABITO & HAO LL	.P		C	ertificate of Mailing or Tran	smission	
Third Floor				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile			
Two North Market				addressed to the M transmitted to the US	SPTO (703) 746-4000, on the	date indicated below.	
San Jose, CA 9511	11A3 00000012 09751523			Judy Dav		(Depositor's name)	
4/88 88 DD				araul	arou t	(Signature)	
01 FC:1501 1400.		VV Ur		06/09/05		(Date)	
APPLICATION NO.	FILING DATE	1	FIRST NAMED INVE	NTOP	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
			Thomas Hock	TOR	CSCO-90747	8844	
09/751,523	12/28/2000				·	8877	
TITLE OF INVENTION: Se	CALEABLE RSVP SIGNA	LING BEI WEEN	VOIP DIAL-FEERS	FOR TANDEM VOI	CE SOLUTIONS		
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	)	\$0	\$1400	06/09/2005	
EXAMINER		ART UN	IT C	LASS-SUBC LASS	]		
ELALLAM, AHMED		2662		370-477000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO E	E PRINTED ON T	HE PATENT (print	or type)			
					gnee is identified below, the	document has been filed fo	
(A) NAME OF ASSIGN	EE	(B	) RESIDENCE: (CI	ΓY and STATE OR C	OUNTRY)		
Cisco Technology, Inc. San Jose, CA							
	e assignee category or catego			Individual 🖾	Corporation or other private gr	oup entity Governmen	
4a. The following fee(s) are	enclosed:	4b	. Payment of Fee(s):				
Issue Fee	11		_	mount of the fee(s) is			
_ `				Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to			
Advance Order - # of	Copies	·- <u>-</u>	Deposit Account Nu	mber 23-0085	(enclose an extra	copy of this form).	
	(from status indicated above MALL ENTITY status. See	•	b. Applicant is n	o longer claiming SM	ALL ENTITY status. See 37 C	CFR 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the lss publication Fee (if required) ords of the United States Pat	ue Fee and Publicat will not be accepted ent and Trademark	tion Fee (if any) or to I from anyone other to Office.	re-apply any previou than the applicant; a re	sly paid issue fee to the applic egistered attorney or agent; or t	ation identified above. the assignee or other party in	
Authorized Signature	Jany	17		Date	43/05		
Typed or printed name _	James P. Hao			Registratio	on No. 36,398		
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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Docket No.: csco-90747

The parity that this transmittal of the below described document is being deposited with the United States Postal Service in an envelope bearing First Class Postage and addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the below date of deposit.

Date of Deposit

06/09/05

Name of Person Making the Deposit:

Judy Davenport

Signature of the Person Making the Deposit:

Inventor(s):

Thomas Hock

Serial No .:

09/751,523

Group Art Unit:

2662

Filed:

12/28/00

Examiner:

Elallam, Ahmed

Confirmation No: 8844

Title:

SCALEABLE RSVP SIGNALING BETWEEN VOIP DIAL-PEERS FOR TANDEM

VOICE SOLUTIONS

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450 ATTENTION: Mail Stop Issue Fee

Sir:

#### TRANSMITTAL OF PAYMENT OF ISSUE FEE (37 CFR 1.311)

Applicant hereby pays the issue fee for the attached Issue Fee Transmittal PTOL-85

X Applicant is other than a small entity

### Fee Calculation

(for other than a small entity)							
Application Status is:	Regular	<u>Design</u>	Total				
Fee (CFR 1.18(a) and (b)):	X \$1,400.00	\$800.00	1,400.00				
Additional Copies (0 @ \$3.00)							
Total Fees							

#### **PAYMENT OF FEES**

- The full fee due in connection with this communication is 1. provided as follows:
- The Commissioner is hereby authorized to charge any additional fees associated with this [X]communication or credit any overpayment to Deposit Account No.: 23-0085. A duplicate copy of this authorization is enclosed.
- [ X ] A check in the amount of \$1,400.00
- Charge any fees required or credit any overpayments associated with this filing to Deposit Account No.: 23-0085.

Please direct all correspondence concerning the above-identified application to the following address:

WAGNER, MURABITO & HAO LLP Two North Market Street, Third Floor San Jose, California 95113 (408) 938-9060

Respectfully submitted,

James P. Hao

Reg. No.: 36,398